

Mayor's Student Service Citation

Do you know a Warwick high school student who should be recognized for an outstanding achievement?

Mayor Scott Avedisian and the **Volunteens** are seeking nominations to recognize outstanding efforts of high school students in Warwick. Each month, one student will receive the Mayor's Student Service Citation for an outstanding accomplishment in service to our community. Nominations may be made by anyone in the community. The Mayor's Office and the **Volunteens** Youth Governing Council will select one student per month to receive this award.

The student chosen will receive the citation, personally delivered by the Mayor to their classroom. They will also be featured in the *Warwick Beacon* and on the city's website.

Requirements

1. Any member of the community may nominate a Warwick high school student for this award, by filling out the Nomination Form and sending it to the **Volunteens** office.
2. The award will recognize an outstanding achievement of the particular student, related to service to the community or volunteer effort.
3. All nominations will be considered by the **Volunteens** Youth Governing Council. One nominee per month will be chosen, by the **Volunteens** Youth Governing Council to receive the award.

Volunteens is a non-profit program working in partnership with the City of Warwick and the Volunteer Center of Rhode Island to engage all Warwick teens in civic participation, community involvement and volunteer service. Any Warwick high school student may join **Volunteens**! For more information or to get involved please contact us at the information below.

Nomination Forms are available at www.warwickri.gov or by contacting the Volunteens office at:

Volunteens Program
Office of Youth Services
3275 Post Road
Warwick, RI 02886
(401)-463-3911
Volunteen@warwickri.com



Nomination Form

Mayor's Student Service Citation

Name of Student: _____

(Please print as name will appear on citation)

School student attends: _____ Grade: _____

Student Contact information: _____

Your Name: _____ Relationship to Student: _____

Your Contact Information: _____

Please describe student's accomplishment and/or outstanding effort:

(You may include an additional sheet of paper if necessary)

Please complete this form and mail to the VolunTEEN office:

The VolunTEEN Program
Office of Youth Services
3275 Post Road
Warwick, RI 02886